

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			<i>413</i>
FORMALITY REVIEW	<i>C.T.</i>	<i>936</i>	<i>63-12-01</i>
RESPONSE FORMALITY REVIEW	<i>Yours</i>	<i>657</i>	<i>7/2/10</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 - Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	<i>9/1/10</i>
1 ✓	
2 ✓	
3 ✓	
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Claim	Date
Final	
Original	<i>9/1/10</i>
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here